ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/31/2011 (3) (2) (1) **Annual Premium** Percent Change (+ or -)** Volume (Illinois)* Coverage Automobile Liability Private 1. Passenger Commercial 2. Automobile Physical Damage **Private Passenger Commercial** 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety **Boiler and Machinery** 8. 9. Fire 10. Extended Coverage 11. Inland Marine 4.6% 93,479 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing to revise LCM's. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.

Citizens Insurance Company of America		
	Name of Company	
	Mandi Al-Beik - Associate State Filing Analyst	
	Official – Title	

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/31/2011

	(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	<u>Coverage</u>	Volume (minois)	Change (1 Or -)
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine	2,685	4.6%
12.	Homeowners		
13.	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	es filing only apply to certain territory (territories) or certain classes? If so, specify:	No
		rates of an advisory organization, specify org	anization):
Filin	g to revise LCM's.		
	P. J. J. M. J. W. W. J. W. W. J. W. W. J. W. W. J. W.		
	justed to reflect all prior rate changes		
	nange in Company's premium level w	hich will result from application of new rates.	
		Oldinana Ina	
			urance Company of Illinois
		Na	ame of Company
		Mandi Al-Raik	Associate State Filing Analyst
			Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/31/2011 (2) (3) (1) **Annual Premium Percent** Change (+ or -)** Volume (Illinois)* Coverage Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage **Private Passenger Commercial** 3. Liability Other Than Auto **Burglary and Theft** 4. 5. Glass 6. Fidelity 7. Surety **Boiler and Machinery** 8. 9. Fire 10. Extended Coverage 4.6% 11. Inland Marine 85,645 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing to revise LCM's. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Hanover Insurance Company Name of Company

Mandi Al-Beik - Associate State Filing Analyst
Official - Title

SUMMARY SHEET

Form	/D	E 21
POHIL	(IT	F51

Change in Company's premium or rate level prod	luced by rate revision effective:	01/01/2011
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	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine Commercial	\$61,661.00	< -1%
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other:		
Does filion		territories) or certain classes? NO	
Brief des Adopti n	scription of filing. (If filing follows r g AAIS 01 05 Commercial Inlan	rates of an advisory organization, specify ad Marine manual including loss costs	organization): . Loss Cost Multiplier developed

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

IMT Insurance Company Name of Company

Jason Thompson, BA, MA Filing Analyst, Research & Development Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/31/2011

(1)		(2)		(3)	
	Coverage	Annual Premium Volume (Illinois)*		Percent Change (+ or -)**	
1.	Automobile Liability Private Passenger Commercial				
2.	Automobile Physical Damage Private Passenger Commercial		•		
3.	Liability Other Than Auto				
4.	Burglary and Theft				
5.	Glass				
6.	Fidelity				
7.	Surety				
8.	Boiler and Machinery				
9.	Fire				
10.	Extended Coverage				
11.	Inland Marine	52,116		4.6%	
12.	Homeowners				
13.	Commercial Multi-Peril				
14.	Crop Hail				
15.	Other				
	Line of Insurance				
Doe	es filing only apply to certain territory (territories) or certain classes? If so, speci	ify: .	No	
Brie	ef description of filing. (If filing follows	rates of an advisory organization, specify	orgar	nization):	
Filin	g to revise LCM's.				
	justed to reflect all prior rate changes hange in Company's premium level w	hich will result from application of new rat	tes.		
		Massach	nusetts	Bay Insurance Company	
			Nam	e of Company	
		Mandi Al-B	eik - As	ssociate State Filing Analyst	
			Of	ficial _ Title	